evidently hysterical, in which nystagmus was well marked, and not dependent upon any ocular defect. To prove its hysterical basis, the author cites the fact that it disappears under hypnotic suggestion, and that it was accompanied by retraction of the visual fields. J. C.

Crossing of the Respiratory Paths in the Cord.—Porter (*Centralb. für Physiol.*, viii. 7, 1894).

The author concludes: 1. That the respiratory paths ascend in the lateral columns of the cervical cord. 2. That stimulation from the medullary centres can excite, unless dyspnœa prevents, the phrenic centre of the other side. 4. This diacussution occurs at the level of the phrenic centre. 4, Such a discussation does not occur in the cord between the phrenic centre and calamus scriptorious. J. C.

The Trophic Properties of Nerves.—Gaule. (*Berlin. Klin. Wochenschr.*, Nos. 44 and 45, 1893.) The contention of the author is that trophic properties are not dependent upon special trophic nerves, but that such properties are furnished nerves by their ganglionic cells. To the objection of Eckard, that if such be a fact then we should not get atrophy by section of the trigeminal centralwards from the Gasserian ganglion, which the latter has frequently produced, Gaule replies that he has repeated the experiment of Eckard and is convinced that the nerve contains as far as this point: *i. e.*, a point considerable distance from the pons a great number of ganglionic cells.

Injury of the third, fourth, fifth and sixth spinal ganglion in the rabbit is followed by trophic troubles in the skin, the glands and muscles, not alone on the same side as the injury, but on the other side as well; and not alone in the territory of the corresponding ganglion, but also in the territory of other nerves. When the ganglion has previously been denuded, irritation and lesions are without result. The alteration which it produces in the ganglionic cells effects results by being carried to the spinal cord through the posterior roots. In order to obtain trophic lesions in the rabbit which shall be confined to the same muscles, the author experimented on the inferior cervical ganglion of the sympathetic. The changes that followed were in every instance confined to the same portion of the brachial biceps, and the psoaus iliacus' and showed identical characteristics. As in some of the cases, the affected muscles were on the same side as the experiment was performed on, sometimes on the opposite side, and sometimes the muscles of both sides, one is obliged to admit that the transmission was effected through the spinal cord by the aid of the communicating branches of the sympapathetic with the spinal nerves.

Gaule was able to follow the evolution of the alterations which went on in the midst of a muscle by the aid of his discovery of a nerve which stopped at a place adjoining the spinal ganglion. The irritation of this nerve-branch made the ganglion insensible to excitation, in spite of the fact that that section of the nerve caused exaggerated ganglionic sensibility. A few moments after excitation of the ganglion the muscle lost at one point of its surface its soft silken feeling. Then appeared a liquid at this point, and the surface of the muscle began to show lowered nutrition and to become rugous.

This depression involved the entire muscle, both on its external and internal surface. In the median portion it extended as far as the tendon, from which it was separated by a languette. In from five to ten minutes an ulceration was produced which was characterized by its very red color and with elevated borders. Often the ulceration was so extensive that it sufficed to cut the muscle in two. Not infrequently a considerable hæmorrhage followed or attended such ulceration, and this hæmorrhage penetrated into the neighboring muscular fibres and the connective tissues. The succession of phenomena in such conditions is as follows: The first alteration is a softening or liquefaction of the muscular fibres at the determinate point. The fibres do not break down unless there is a contraction or distension of the muscles, but rather because of the normal state of tension of the muscles which the altered fibres are no longer capable of resisting. Once the fibres break, their loose ends retract themselves, thus forming a nervous thickening around the ulceration. From the very beginning one is able to distinguish microscopically in the muscular fibres cavities which become filled with liquid in spite of the fact that the rest of the substance continues red as it approaches the interior of the sarcoloma. J. C.

PATHOLOGICAL.

Examination of the Blood in Myxœdema. Drs. Libreton and Vaquez (*La France Méd.*, January 18, 1895) presented a patient with congenital myxœdema, treated with thyroid. The diameter of the red globules before the treatment began was 3 M 13; afterwards it was 7 M 5. At the same time the appearance of nucleated red globules was observed, which disappeared under treatment. It would appear as though the persistence of the foetal state of the blood coincided with the tardy development of the body. Kraepeliu observed the same modification of the blood two years ago. MACALESTER.

Scleroderma in Plaques. Dr. Hallopeau (*La France Méd.*, January 18, 1895) presented a case of *sclerodermie en bande*, limited to the area of the internal cutaneous brachial nerve. The disorder began as a spot in the middle of the forearm, and only after several months extended the whole length of the upper extremity. If, as is probable, the affection is a tropho-neurosis, the different fibres of the nerve were involved successively. The onset and course were marked by paræsthesia and lancing, cutting pains. In the sclerosed parts there was a diminution of sensibility to touch and pain, which is generally not the case. MACALESTER.

The Influence of the Thyroid on the Amount of Oxyhæmoglobin in the Blood. Dr. Paul Masion (*Bull. de l'Acad. ray. de Méd. de Belgique*, iv. ser., vol. ix., No. 1) in an elaborate experimental *memoire*, comes to the following conclusions: 1. The relative amount of oxyhæmoglobin is diminished after thyroidectomy. 2. The chart of the diminution follows, markedly, the course of the injuries which follow thyroidectomy. 3. During the epileptiform seizures and nervous accesses there is a mixture of reddened hæmoglobin and oxyhæmoglobin. 4. The diminution of the oxyhæmoglobin does not result from the diminution of the relative number of red globules or from the inanition following the injuries. 5. The diminution is the direct result of the suppression of the functions of the thryoid. MACALESTER.

Pathological-Anatomical Findings on the Clivus in Insane Patients.—Dr. R. Schweter. (*Allegemeine Zeitschr. für Psychiatrie und Psychisch-gerichtlische Med.*).

The writer gives a short anatomical description of the clivus. In his researches he finds this structure to vary frequently with regard to its form and direction of surfaces. Especially to be noticed is the frequent and remarkable division of its surface into three parts. In addition, the abnormal line formations, such as ridges running obliquely across its surface, tuberous prominences, and osteophytes, both single and double in number are present. The author finds that it does not possess any distinct relation in regard to its form with the neighboring structures.

Of most importance, for examination, he considers the irregularities on the surface of the clivus, viz.: the echondroses, exostoses and osteophytes. The consistence of the same should not be forgotten.

In a careful examination of the skulls of 316 insane patients with reference to this particular part, he has noted his findings as follows:

One hundred and sixty-five were males; 151 were females. One